

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Type:: REGULAR  
Subject Matter:: UTILITY  
CD-ROM or CD-R?:: NONE  
Title:: DERMATOLOGICAL PREPARATIONS  
Attorney Docket Number:: 246344US0DIV  
Total Drawing Sheets:: 0  
Small Entity?:: NO  
Petition Included?:: NO

### INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Masahide  
Family Name:: HOSHINO  
City of Residence:: Tochigi  
State or Province of Residence:: Haga-gun  
Country of Residence:: JAPAN  
Street of Mailing Address:: c/o KAO CORPORATION RESEARCH  
LABORATORIES, 2606, Akabane,  
Ichikaimachi  
City of Mailing Address:: Tochigi  
State or Province of Mailing Address:: Haga-gun  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 321-3497

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Yoshiya  
Family Name:: SUGAI  
City of Residence:: Tochigi  
State or Province of Residence:: Haga-gun  
Country of Residence:: JAPAN  
Street of Mailing Address:: c/o KAO CORPORATION RESEARCH  
LABORATORIES, 2606, Akabane,  
Ichikaimachi  
City of Mailing Address:: Tochigi  
State or Province of Mailing Address:: Haga-gun  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 321-3497

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Akiyo  
Family Name:: KAMEYAMA  
City of Residence:: Tochigi  
State or Province of Residence:: Haga-gun  
Country of Residence:: JAPAN  
Street of Mailing Address:: c/o KAO CORPORATION RESEARCH  
LABORATORIES, 2606, Akabane,  
Ichikaimachi  
City of Mailing Address:: Tochigi  
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Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 321-3497

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Hiroaki  
Family Name:: SAITO  
City of Residence:: Tochigi  
State or Province of Residence:: Haga-gun  
Country of Residence:: JAPAN  
Street of Mailing Address:: c/o KAO CORPORATION RESEARCH  
LABORATORIES, 2606, Akabane,  
Ichikaimachi  
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State or Province of Mailing Address:: Haga-gun  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 321-3497

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Yoshinori  
Family Name:: NISHIZAWA  
City of Residence:: Tochigi  
State or Province of Residence:: Haga-gun  
Country of Residence:: JAPAN  
Street of Mailing Address:: c/o KAO CORPORATION RESEARCH  
LABORATORIES, 2606, Akabane,  
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Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 321-3497

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: JAPAN  
Status:: FULL CAPACITY  
Given Name:: Yutaka  
Family Name:: TAKAGI  
City of Residence:: Tochigi  
State or Province of Residence:: Haga-gun  
Country of Residence:: JAPAN  
Street of Mailing Address:: c/o KAO CORPORATION RESEARCH LABORATORIES, 2606, Akabane, Ichikaimachi  
City of Mailing Address:: Tochigi  
State or Province of Mailing Address:: Haga-gun  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address:: 321-3497

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Division of	09/926,270	10/04/01
This Application	National Stage of	PCT/JP00/01383	03/08/00

#### FOREIGN PRIORITY INFORMATION

Application Number:	Country::	Filing Date::	Priority Claimed::
11-101076	Japan	04/08/99	YES

#### ASSIGNMENT INFORMATION

Assignee Name:: KAO CORPORATION  
Street of Mailing Address:: 14-10, Nihonbashi Kayaba-cho  
1-chome, Chuo-ku  
City of Mailing Address:: Tokyo  
Country of Mailing Address:: Japan

Postal or Zip Code of Mailing Address:: 103-8210